

Attorney Docket No.: P-140

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Sung Bae JUN

Application No.: 09/692,316

Filed: October 20, 2000

For: METHOD FOR PROVIDING USER-ADAPTIVE MULTI-LEVEL DIGEST  
STREAM

REQUEST FOR CORRECTED FILING RECEIPT

Box: Patent Application  
Commissioner of Patents and Trademarks  
Washington, D. C. 20231

Sir:

A corrected filing receipt is hereby requested in view of the errors which appear in the original. For the convenience of the Patent and Trademark Office, attached is a photocopy of the original receipt on which the errors have been noted in red.

X **PTO ERROR** - As the error was made by the Patent and Trademark Office, it is believed that no fee is due. However, please credit or debit Deposit Account No. 16-0607 as necessary to effect entry of the attached corrections.

   **APPLICANT'S ERROR** - In accordance with the provisions of 37 C.F.R. 1.19(h), our Check No. \_\_\_\_\_ in the amount of \$25.00 is attached. Please credit or debit Deposit Account No. 16-0607 as necessary to effect entry of the attached corrections.

Respectfully submitted,  
FLESHNER & KIM, LLP



Daniel Y.J. Kim  
Registration No. 36,186  
Carl R. Wesolowski  
Registration No. 40,372

P. O. Box 221200  
Chantilly, VA 20153-1200  
Telephone: (703) 502-9440  
Date: January 25, 2001

#5 3/17/01  
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PATENT APPLICATION

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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/692,316	10/20/2000	2615	710	P-140	3	14	<del>X</del> 3

Fleshner & Kim  
P O Box 221200  
Chantilly, VA 20153-1200

## FILING RECEIPT



\*OC000000005646792\*

Date Mailed: 01/01/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

Sung Bae Jun, Seoul, KOREA, REPUBLIC OF;

## Continuing Data as Claimed by Applicant

## Foreign Applications

REPUBLIC OF KOREA 45943/1999 10/22/1999

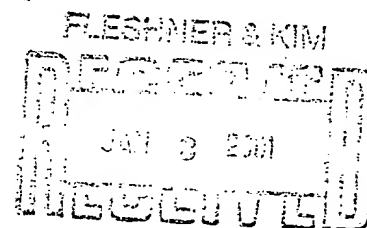
If Required, Foreign Filing License Granted 12/29/2000

## Title

Method for providing user-adaptive multi-level digest stream

## Preliminary Class

386



Data entry by : ROBINSON, YOLANDA

Team : OIPE

Date: 01/01/2001



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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/692,316	<b>FILING DATE</b> 10/20/2000 <b>RULE</b> -	<b>CLASS</b> 386	<b>GROUP ART UNIT</b> 2615	<b>ATTORNEY DOCKET NO.</b> P-140	
<b>APPLICANTS</b> Sung Bae Jun, Seoul, KOREA, REPUBLIC OF; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> REPUBLIC OF KOREA 45943/1999 10/22/1999 <b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 12/29/2000</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> KOREA, REPUBLIC OF	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 14	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> Fleshner & Kim P O Box 221200 Chantilly, VA 20153-1200					
<b>TITLE</b> Method for providing user-adaptive multi-level digest stream					
<b>FILING FEE RECEIVED</b> 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		